

<i>SERFF Tracking Number:</i>	<i>ARKS-125427406</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>51624 - UNITED GENERAL TITLE INSURANCE CO</i>	<i>State Tracking Number:</i>	<i>#129013 \$50</i>
<i>Company Tracking Number:</i>	<i>AR-2008-1F</i>		
<i>TOI:</i>	<i>34.0 Title</i>	<i>Sub-TOI:</i>	<i>34.0000 Title</i>
<i>Product Name:</i>	<i>Title</i>		
<i>Project Name/Number:</i>	<i>/</i>		

Filing at a Glance

Company: 51624 - UNITED GENERAL TITLE INSURANCE CO

Product Name: Title	SERFF Tr Num: ARKS-125427406	State: Arkansas
TOI: 34.0 Title	SERFF Status: Closed	State Tr Num: #129013 \$50
Sub-TOI: 34.0000 Title	Co Tr Num: AR-2008-1F	State Status: Fees verified and received
Filing Type: Form	Co Status:	Reviewer(s): Betty Montesi, Llyweyia Rawlins, Brittany Yielding
	Author:	Disposition Date: 01/11/2008
	Date Submitted: 01/11/2008	Disposition Status: Approved
Effective Date Requested (New):		Effective Date (New): 01/11/2008
Effective Date Requested (Renewal):		Effective Date (Renewal): 01/11/2008
State Filing Description:		

General Information

Project Name:	Status of Filing in Domicile:
Project Number:	Domicile Status Comments:
Reference Organization:	Reference Number:
Reference Title:	Advisory Org. Circular:
Filing Status Changed: 01/11/2008	
State Status Changed: 01/11/2008	Deemer Date:
Corresponding Filing Tracking Number:	
Filing Description:	

Company and Contact

Filing Contact Information

NA NA, NA@NA.com

SERFF Tracking Number:	ARKS-125427406	State:	Arkansas
Filing Company:	51624 - UNITED GENERAL TITLE INSURANCE CO	State Tracking Number:	#129013 \$50
Company Tracking Number:	AR-2008-1F		
TOI:	34.0 Title	Sub-TOI:	34.0000 Title
Product Name:	Title		
Project Name/Number:	/		

NA	(123) 555-4567 [Phone]
NA, AR 00000	

Filing Company Information

51624 - UNITED GENERAL TITLE	CoCode: 51624	State of Domicile: Arkansas
INSURANCE CO		
No Address	Group Code:	Company Type:
City, AR 99999	Group Name:	State ID Number:
(999) 999-9999 ext. [Phone]	FEIN Number: 99-9999999	

<i>SERFF Tracking Number:</i>	<i>ARKS-125427406</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>51624 - UNITED GENERAL TITLE INSURANCE CO</i>	<i>State Tracking Number:</i>	<i>#129013 \$50</i>
<i>Company Tracking Number:</i>	<i>AR-2008-1F</i>		
<i>TOI:</i>	<i>34.0 Title</i>	<i>Sub-TOI:</i>	<i>34.0000 Title</i>
<i>Product Name:</i>	<i>Title</i>		
<i>Project Name/Number:</i>	<i>/</i>		

Filing Fees

Fee Required?	No
Retaliatory?	No
Fee Explanation:	
Per Company:	No

SERFF Tracking Number:	ARKS-125427406	State:	Arkansas
Filing Company:	51624 - UNITED GENERAL TITLE INSURANCE CO	State Tracking Number:	#129013 \$50
Company Tracking Number:	AR-2008-1F		
TOI:	34.0 Title	Sub-TOI:	34.0000 Title
Product Name:	Title		
Project Name/Number:	/		

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Llyweyia Rawlins	01/11/2008	01/11/2008

<i>SERFF Tracking Number:</i>	<i>ARKS-125427406</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>51624 - UNITED GENERAL TITLE INSURANCE CO</i>	<i>State Tracking Number:</i>	<i>#129013 \$50</i>
<i>Company Tracking Number:</i>	<i>AR-2008-1F</i>		
<i>TOI:</i>	<i>34.0 Title</i>	<i>Sub-TOI:</i>	<i>34.0000 Title</i>
<i>Product Name:</i>	<i>Title</i>		
<i>Project Name/Number:</i>	<i>/</i>		

Disposition

Disposition Date: 01/11/2008
Effective Date (New): 01/11/2008
Effective Date (Renewal): 01/11/2008
Status: Approved
Comment:

Rate data does NOT apply to filing.

<i>SERFF Tracking Number:</i>	<i>ARKS-125427406</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>51624 - UNITED GENERAL TITLE INSURANCE CO</i>	<i>State Tracking Number:</i>	<i>#129013 \$50</i>
<i>Company Tracking Number:</i>	<i>AR-2008-1F</i>		
<i>TOI:</i>	<i>34.0 Title</i>	<i>Sub-TOI:</i>	<i>34.0000 Title</i>
<i>Product Name:</i>	<i>Title</i>		
<i>Project Name/Number:</i>	<i>/</i>		

Item Type	Item Name	Item Status	Public Access
Supporting Document	Uniform Transmittal Document-Property & Casualty	Approved	Yes
Supporting Document	ARKS-125427406		No

<i>SERFF Tracking Number:</i>	<i>ARKS-125427406</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>51624 - UNITED GENERAL TITLE INSURANCE CO</i>	<i>State Tracking Number:</i>	<i>#129013 \$50</i>
<i>Company Tracking Number:</i>	<i>AR-2008-1F</i>		
<i>TOI:</i>	<i>34.0 Title</i>	<i>Sub-TOI:</i>	<i>34.0000 Title</i>
<i>Product Name:</i>	<i>Title</i>		
<i>Project Name/Number:</i>	<i>/</i>		

Rate Information

Rate data does NOT apply to filing.

<i>SERFF Tracking Number:</i>	<i>ARKS-125427406</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>51624 - UNITED GENERAL TITLE INSURANCE CO</i>	<i>State Tracking Number:</i>	<i>#129013 \$50</i>
<i>Company Tracking Number:</i>	<i>AR-2008-1F</i>		
<i>TOI:</i>	<i>34.0 Title</i>	<i>Sub-TOI:</i>	<i>34.0000 Title</i>
<i>Product Name:</i>	<i>Title</i>		
<i>Project Name/Number:</i>	<i>/</i>		

Supporting Document Schedules

Satisfied -Name:	ARKS-125427406	Review Status:	01/11/2008
Comments:			
Attachment:			
ARKS-125427406.pdf			



UNITED GENERAL
TITLE INSURANCE COMPANY
"THE HOME OF FIVE STAR SERVICE"

CHK# 129013
\$ 50
ARKS-125427406

CR

January 9, 2008

Arkansas Insurance Department
1200 West Third Street
Little Rock, AR 72201

Property & Casualty Division
Forms Filing

Re: Company Tracking Number AR-2008-1F

Dear Ladies and Gentlemen:

Please find the enclosed United General Title Insurance Company form CPL-05.1 (Closing Protection Letter) for approval and filing for issuance in the State of Arkansas by approved title agents for United General Title Insurance Company.

We have also enclosed our check in the amount of \$50.00 to cover the requisite filing fee.

Sincerely,

Dwight J. Dunlap
Vice President
Underwriting Counsel

Approved until withdrawn
or revoked

JAN 11 2008

Arkansas Insurance Department

By:

RECEIVED

JAN 10/2008

PROPERTY AND CASUALTY DIVISION
ARKANSAS INSURANCE DEPARTMENT

Property & Casualty Transmittal Document

Reset Form

**1. Reserved for Insurance
Dept. Use Only**Approved until withdrawn
or revoked

JAN 11 2008

Arkansas Insurance Department

By: *JK***2. Insurance Department Use only**

a. Date the filing is received:

b. Analyst:

c. Disposition:

d. Date of disposition of the filing:

e. Effective date of filing:

New Business

Renewal Business

f. State Filing #:

g. SERFF Filing #:

h. Subject Codes

3. Group Name

Group NAIC #

4. Company Name(s)

Domicile

NAIC #

FEIN #

State #

United General Title Insurance Company

Co

51624

51624

RECEIVED

JAN 10 2008

PROPERTY AND CASUALTY DIVISION
ARKANSAS INSURANCE DEPARTMENT**5. Company Tracking Number**

AR 2008-1F

Contact Info of Filer(s) or Corporate Officer(s) [include toll-free number]

6.	Name and address	Title	Telephone #s	FAX #	e-mail
	Dwight J. Dunlap 13750 San Pedro, Suite 715 San Antonio, Texas 78232	Vice President	210 499 4545	210 499 4807	djdunlap@ugtic.com
7.	Signature of authorized filer		<i>Dwight J. Dunlap</i>		
8.	Please print name of authorized filer		DWIGHT J. DUNLAP		

Filing information (see General Instructions for descriptions of these fields)

9.	Type of Insurance (TOI)	Please select from the drop down list.			
10.	Sub-Type of Insurance (Sub-TOI)				
11.	State Specific Product code(s)(if applicable)[See State Specific Requirements]				
12.	Company Program Title (Marketing title)				
13.	Filing Type	<input type="checkbox"/> Rate/Loss Cost <input type="checkbox"/> Rules <input type="checkbox"/> Rates/Rules <input checked="" type="checkbox"/> Forms <input type="checkbox"/> Combination Rates/Rules/Forms <input type="checkbox"/> Withdrawal <input type="checkbox"/> Other (give description)			
14.	Effective Date(s) Requested	New:		Renewal:	
15.	Reference Filing?	<input type="checkbox"/> Yes <input type="checkbox"/> No			
16.	Reference Organization (if applicable)				
17.	Reference Organization # & Title				
18.	Company's Date of Filing	January 9, 2008			
19.	Status of filing in domicile	<input type="checkbox"/> Not Filed <input type="checkbox"/> Pending <input type="checkbox"/> Authorized <input type="checkbox"/> Disapproved			

Property & Casualty Transmittal Document—

20. This filing transmittal is part of Company Tracking #

21. **Filing Description** [This area can be used in lieu of a cover letter or filing memorandum and is free-form text]

[View Complete Filing Description](#)

22. **Filing Fees** (Filer must provide check # and fee amount if applicable)
[If a state requires you to show how you calculated your filing fees, place that calculation below]

Check #: 129013

Amount: \$50.00

Refer to each state's checklist for additional state specific requirements or instructions on calculating fees.

***Refer to the each state's checklist for additional state specific requirements (i.e. # of additional copies required, other state specific forms, etc.)

FORM FILING SCHEDULE

(This form must be provided ONLY when making a filing that includes forms)
 (Do not refer to the body of the filing for the forms listing, unless allowed by state.)

1.	This filing transmittal is part of Company Tracking #				
2.	This filing corresponds to rate/rule filing number (Company tracking number of rate/rule filing, if applicable)				
3.	Form Name /Description/Synopsis	Form # Include edition date	Replacement Or withdrawn?	If replacement, give form # it replaces	Previous state filing number, if required by state
01	Closing Protection Letter	CPL-05-1	<input checked="" type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
02			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
03			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
04			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
05			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
06			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
07			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
08			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
09			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
10			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		

PC FFS-1

RATE/RULE FILING SCHEDULE

(This form must be provided ONLY when making a filing that includes rate-related items such as Rate; Rule; Rate & Rule; Reference; Loss Cost; Loss Cost & Rule or Rate, etc.)

(Do not refer to the body of the filing for the component/exhibit listing, unless allowed by state.)

1.	This filing transmittal is part of Company Tracking #	
----	-------------------------------------------------------	--

2.	This filing corresponds to form filing number (Company tracking number of form filing, if applicable)	
----	----------------------------------------------------------------------------------------------------------	--

☐ Rate Increase
 ☐ Rate Decrease
 ☐ Rate Neutral (0%)

3.	Filing Method (Prior Approval, File & Use, Flex Band, etc.)	
----	-------------------------------------------------------------	--

4a.	Rate Change by Company (As Proposed)						
Company Name	Overall % Indicated Change (when applicable)	Overall % Rate Impact	Written premium change for this program	# of policyholders affected for this program	Written premium for this program	Maximum % Change (where required)	Minimum % Change (where required)

4b.	Rate Change by Company (As Accepted) For State Use Only						
Company Name	Overall % Indicated Change (when applicable)	Overall % Rate Impact	Written premium change for this program	# of policyholders affected for this program	Written premium for this program	Maximum % Change	Minimum % Change

5. Overall Rate Information (Complete for Multiple Company Filings only)			
		COMPANY USE	STATE USE
5a	Overall percentage rate indication (when applicable)		
5b	Overall percentage rate impact for this filing		
5c	Effect of Rate Filing – Written premium change for this program		
5d	Effect of Rate Filing – Number of policyholders affected		

6.	Overall percentage of last rate revision	
7.	Effective Date of last rate revision	
8.	Filing Method of Last filing (Prior Approval, File & Use, Flex Band, etc.)	

9.	Rule # or Page # Submitted for Review	Replacement or withdrawn?	Previous state filing number, if required by state
01		<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn	
02		<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn	
03		<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn	



UNITED GENERAL TITLE INSURANCE COMPANY

"THE HOME OF FIVE STAR SERVICE"

Date Issued:

To:

Re:

Reference:

Sir or Madam:

When title insurance of United General Title Insurance Company (the "Company") is specified for your protection in connection with closings of real estate transactions in which you are to be the: (a) lessee of an interest in land, (b) purchaser of an interest in land, (c) lender secured by a mortgage (including any other security instrument) of an interest in land, its assignees or a warehouse lender (d) Seller of an interest in land, or (e) lessor of an interest in land, the Company, subject to the Conditions and Exclusions set forth below, hereby agrees to reimburse you for actual loss incurred by you in connection with such closings when conducted by the Issuing Agent (an agent authorized to issue title insurance for the Company), Approved Attorney (an attorney upon whose certification of title the Company issues title insurance), or Approved Closing Services Vendor (a vendor authorized to close loans, pursuant to which title insurance of the Company will be issued) referred to above and when such loss arises out of:

1. Failure of the Issuing Agent, Approved Attorney, or Approved Closing Services Vendor to comply with your written closing instructions to the extent that they relate to (a) the status of the title to said interest in land or the validity, enforceability and priority of the lien of said mortgage on said interest in land, including the obtaining of documents and the disbursement of funds necessary to establish such status of title or lien, or (b) the obtaining of any other document, specifically required by you, but only to the extent the failure to obtain such other document affects the status of the title to said interest in land or the validity, enforceability and priority of the lien of said mortgage on said interest in land, or
2. Fraud, dishonesty or negligence of the Issuing Agent, Approved Attorney, or Approved Closing Services Vendor in handling your funds or documents in connection with such closings to the extent such fraud, dishonesty or negligence relates to the status of the title to said interest in land or to the validity, enforceability, and priority of the lien of said mortgage on said interest in land.

If you are a lender protected under the foregoing paragraph, your borrower, your assignee and your warehouse lender in connection with a loan secured by a mortgage shall be protected as if this letter were addressed to them.

Conditions and Exclusions

1. The Company will not be liable to you for loss arising out of:
 - A. Failure of the Issuing Agent, Approved Attorney, or Approved Closing Services Vendor to comply with your closing instructions which require title insurance protection inconsistent with that set forth in the title insurance binder or commitment issued by the Company. Instructions which require the removal of specific exceptions to title or compliance with the requirements contained in said binder or commitment shall not be deemed to be inconsistent.

UNITED GENERAL TITLE INSURANCE CO. • P.O. BOX 1680 • DENVER, COLORADO 80201 • PH. 800-999-3470 • FAX 800-523-7640

CPL-05.1 (1/1/08)


Closing Protection Letter - (01/2008)
ARKANSAS

2. B. Loss or impairment of your funds in the course of collection or while on deposit with a bank due to bank failure, insolvency or suspension, except such as shall result from failure of the Issuing Agent, Approved Attorney, or Approved Closing Services Vendor to comply with your written closing instructions to deposit the funds in a bank which you designated by name.
- C. Mechanics' and materialmen's liens in connection with your purchase or lease or construction loan transactions, except to the extent that protection against such liens is afforded by a title insurance binder, commitment or policy of the Company.
- D. Fraud, dishonesty or negligence of your employee, agent, attorney or broker.
- E. Your settlement or release of any claim without the written consent of the Company.
- F. Any matters created, suffered, assumed or agreed to by you or known to you.
3. If the closing is to be conducted by an Approved Attorney or Approved Closing Vendor, a title insurance binder or commitment for the issuance of a policy of title insurance of the Company must have been received by you prior to the transmission of your final closing instructions to the Approved Attorney or Approved Closing Vendor.
4. When the Company shall have reimbursed you pursuant to this letter, it shall be subrogated to all rights and remedies which you would have had against any person or property had you not been so reimbursed. Liability of the Company for such reimbursement shall be reduced to the extent that you have knowingly and voluntarily impaired the value of such right of subrogation.
5. The company shall have the ability to recover from the party asserting a claim under the letter for any reimbursement such party received for which the insurer has previously paid the party under the letter. The liability of the title insurer for any amounts paid to a party shall be reduced to the extent that the party has knowingly and voluntarily impaired the value of such right to such reimbursement.
6. The protection herein offered shall not extend to any transaction in which the funds you transmit to the Issuing Agent, Approved Attorney or Approved Closing Vendor exceed five million dollars \$5,000,000.00. The Company shall have no liability of any kind for the actions or omissions of the Issuing Agent, Approved Attorney or Approved Closing Vendor in such a transaction except as may be derived under the Company's commitment for title insurance, policy of title insurance or other express written agreement. Please contact the Company if you have such a transaction and desire the protections of this letter to apply to it. This paragraph shall not apply to individual mortgage loan transactions on individual one-to-four-family residential properties (including residential townhouse, condominium and cooperative apartment units).
7. Any liability of the Company for loss incurred by you in connection with closings of real estate transactions by an Issuing Agent, Approved Attorney, or Approved Closing Services Vendor shall be limited to the protection provided by this letter. However, this letter shall not affect the protection afforded by a title insurance binder, commitment or policy of the Company.
8. Claims shall be made promptly to the Company in writing at its principal office at P.O. Box 1680, Denver, Colorado 80201. When the failure to give prompt notice shall prejudice the Company, then liability of the Company hereunder shall be reduced to the extent of such prejudice.
9. The protection herein offered extends to real property transactions in the State of Arkansas.

Any previous insured closing service letter or similar agreement is hereby cancelled, except closings of your real estate transactions regarding which you have previously sent or within 30 days hereafter send written closing instructions to the Issuing Agent, Approved Attorney, or Approved Closing Services Vendor.

Yours truly,

UNITED GENERAL TITLE INSURANCE COMPANY



Andree Ranft
Senior Vice President, National Agency

***For agency confirmation, please email your request to
ugti.agencyservices@ugtic.com in order to receive a confirmation, via email.**

UNITED GENERAL TITLE INSURANCE CO. • P.O. BOX 1680 • DENVER, COLORADO 80201 • PH. 800-999-3470 • FAX 800-523-7640